

## AMENDMENT / RESPONSE TRANSMITTAL

Applicant : Martin Philip Riddiford  
 App. No. : 10/005,751  
 Filed : November 7, 2001  
 For : COMPUTER WITH A PEN OR  
 TOUCH SENSITIVE  
 DISPLAY  
 Examiner : Lisa Lea-Edmonds  
 Art Unit : 2835

## CERTIFICATE OF MAILING

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

October 31, 2003

(Date)

  
 Arthur S. Rose, Reg. No. 28,038

Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing in the above-identified application are the following enclosures:

(X) Supplemental Amendment After Final in 15 pages.

The fee has been calculated as shown below:

FEE CALCULATION				
FEE TYPE		FEE CODE	CALCULATION	TOTAL
Total Claims	56 - 45 =	1202 (\$18)	11 x 18 =	\$198
Independent Claims	9 - 9 =	1201 (\$86)	x 86 =	\$0
Multiple Claim		1203 (\$280)		\$
1 Month Extension		1251 (\$110)		\$
2 Month Extension		1252 (\$420)		\$420
3 Month Extension		1253 (\$950)		\$
			<b>TOTAL FEE DUE</b>	<b>\$ 618</b>

(X) An extension of time is hereby requested by payment of the appropriate fee indicated above.

(X) A check in the amount of \$618 is enclosed.

(X) Return prepaid postcard.

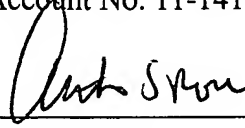
11/05/2003 BABRAHA1 00000026 10005751

02 FC:1252

420.00 OP

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- (X) Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.



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